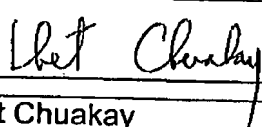


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	Fax. No.	(571) 273-8300
	Application No.	10/627,555
	Filing Date:	July 25, 2003
	Confirmation No.:	3562
	Examiner:	Shailendra Kumar
	Art Unit:	1621
	Attorney Docket No.	P-154-US1
From:	Theravance, Inc.	
	Agent:	Roberta P. Saxon
	Reg. No. :	43,087
	Customer No.:	27038
	Address:	901 Gateway Boulevard South San Francisco, California 94080
	Telephone No.:	(650) 808-3764
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/627,555	
	Filing Date	July 25, 2003	
	First Named Inventor	Martin S. LINSELL	
	Art Unit	1621	
	Examiner Name	Shailendra Kumar	
Total Number of Pages in This Submission	2524	Attorney Docket Number	P-154-US1

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ENCLOSURES (check all that apply)		
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<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	THERAVANCE, INC.		
Signature	<i>Roberta P. Saxon</i>		
Printed Name	Roberta P. Saxon		
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Typed or printed name	Lhet Chuakay	Date	June 29, 2007

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete If Known	
FEE TRANSMITTAL for FY 2006		Application Number	10/627,555
		Filing Date	July 26, 2003
		First Named Inventor	Martin S. LINSELL
		Examiner Name	Shailendra Kumar
		Art Unit	1621
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	P-154-US1
TOTAL AMOUNT OF PAYMENT		(\$) 440.00	

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____
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- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
_____ -20 or HP= _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
_____ - 3 or HP= _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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Other (e.g., late filing surcharge): Fee Code 1806: IDS submission; Fee Code 1814: Terminal Disclaimer

Fees Paid (\$)

\$440.00

SUBMITTED BY

Signature	<i>Roberta P. Saxon</i>	Registration No. (Attorney/Agent)	43,087	Telephone	(650) 808-6000
Name (Print/Type)	Roberta P. Saxon, Ph. D.			Date	June 29, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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By: Lhet Chualay Date: June 29, 2007
Lhet Chualay

PATENT
Attorney Docket No. P-154-US1
Customer Number 27038

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)	
LINSELL et al.)	
Application No.: 10/627,555)	Confirmation No.: 3562
Filed: July 25, 2003)	
For: CRYSTALLINE β_2 ADRENERGIC)	Group Art Unit: 1621
RECEPTOR AGONIST)	Examiner: Shailendra Kumar

RESPONSE UNDER 37 C.F.R. §1.111

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
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Sir:

This reply is being filed in response to the Office Action mailed on January 5, 2007 for the above-identified patent application. The Office Action set a three-month period for response and therefore, this reply is due on or before April 5, 2007. A petition for an Extension of Time of three months accompanies this reply.

A complete listing of the claims starts on page 2.

Remarks start on page 7.

Reconsideration of the application in view of the following remarks is respectfully requested.

Attorney Docket No. P-154-US1
Application Serial No. 10/627,555

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